# **ISD Requirements and Design Document**

Authored by AHCCCS

SSR/Task Number:	2007-0358-01
SSR/Task Title:	Professional Multiple Surger
SSR Priority	<ul><li>☐ Emergency</li><li>☐ Urgent</li><li>☐ High Priority</li><li>☒ Scheduled Work</li></ul>
Requestor(s) Name:	Brent Ratterree
Requestor(s) Phone	74571
Requesting State:	⊠ AZ ☐ HI
Non-Requesting State:	<ul><li>☐ AZ</li><li>☐ HI</li><li>☐ Implementing</li><li>☐ Regression Test Only</li><li>☐ Not Applicable</li></ul>
Subsystem	ENC
Date Completed	9/18/2008
Planned Release Date	9/25/2008
Developed By	George Farry

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## **Requirements and General Design Portion**

For Review and Approval by ISD Customers

## A. Requirements and General Design Approvers

### **Customer Stakeholders**

Brent Ratterree	AHCCCS (Arizona) Requestor/Customer
Wileen Ortega	MED-QUEST (Hawaii) Requestor/Customer

### **ISD Stakeholders**

Mike Upchurch	ISD Project Manager	
Stacy Werterholm	ISD Testing Representative	☐ Testing Planned     ☐ Testing Bypassed

### **B. Business Need / Problem**

Currently the Encounters system does not have multiple surgery logic for professional 1500 encounters. The lack of this logic results in the over-valuation of multiple surgery professional encounters.

## C. Scope

Implement professional 1500 multiple surgery logic as currently in place in the AHCCCS FFS claims programs.

## D. Business Benefits / Impact

Will result in the appropriate valuation of encounters from surgeons for multiple surgeries.

## **E. Business Cases with Expected Outcomes**

Refer to CRN's 071850056441 and 072150159237 in both cases the second surgery listed should have received a 51 modifier and been valued at 50% of the Fee Schedule.

### F. Detailed Requirements

### 1. Encounters Pricing with Multiple Surgery.

- 1.1 Adapt the Claims Form 1500 multiple surgery pricing logic for use with Form 1500 encounters.
  - 1.1.1 Use the OPFS and 1500 Multiple Surgery Rules to ensure that Multiple Surgery logic is correctly coded. (See Requirements Attachments)
  - 1.1.2 Integrate the ASC Multiple Surgery encounters into the new process.
- 1.2 Modify the Replacement and Void processes to function only at the claim header level.

## G. General Design

#### Requirement(s): 1

Adapt the multi surgery logic in the Claims program CLPR2450, to be used in the Encounter Form 1500 Valuation program EC61L917.

Check for related encounters. If there is a primary surgery on an adjudicated encounter, all surgeries on the current encounter will be considered secondary.

The first surgery procedure that is on the encounter and also on the RF122 table as 51 being valid for that procedure will be the primary surgery.

#### Requirement(s): 2

The Form 1500 and Dental load programs will be modified to pend line level Replacements and Voids for error H280 - ENCOUNTER NOT ELIGIBLE TO ADJUST

## H. Input and Output Layouts

N/A

## I. Process Flow Diagram(s)

N/A

## J. Potential Impacts

N/A

## K. Significant Dates and Hours Estimates

Description	Date/Hours
Original Delivery/implementation date	12/23/2008
Planned Delivery/implementation date	9/25/2008
Other significant date	N/A
Initial macro hours	80
Initial estimated hours	119.70
Revised estimated hours	N/A

## L. Special Roles/Responsibilities

N/A

## M. Issues and Questions

N/A

### N. Requirements Assumptions

1) The planned implementation date will be met, provided that this document is approved, by all required parties, within X business days of document receipt.

### O. Constraints

N/A

## P. Glossary

N/A

## Q. Requirements Attachments

### 1. OPFS and 1500 Multiple Surgery Rules.

#### **Multiple Surgery**

#### Identified as -

Two or more surgical procedures (range 1XXXX through 69999) on the same date of service from the same provider,

Or

Two or more units on a single surgical procedure (range 1XXXX through 69999)

#### Notes -

It is possible to have both circumstances listed above within the same claim.

Claims will normally not be submitted with '51 modifiers.

'51 modifiers are not currently identified on RF121 for applicable procedures.

Encounters will normally be submitted with a '51 modifier if applicable.

If a '51 modifier already exists on the claim or encounter and additional '51 modifier should not be added.

If a '51 modifier already exists on the claim or encounter the claim or encounter should be fail edits due to the '51 modifier not being present on RF121.

#### Actions -

Identify the primary and secondary surgery (surgeries) as follows:

Primary = the procedure with the highest fee of the OP Fee Schedule. Multiple units = only the first unit is primary and all other units are secondary.

For all secondary procedures and/or units, verify that the surgical procedure is not an exception from multiple surgery consideration on RF789. If the procedure is present on this table, do not apply multiple surgery logic.

If the procedure is not on RF789, systematically apply the '51 modifier to the secondary procedure and/or units.

#### 1500 Multiple Surgeries

When a claim for multiple surgical procedures is submitted to AHCCCS, it is the policy of AHCCCS to reimburse the primary surgical procedure at 100 percent of the billed charges up to the AHCCCS capped fee. Additional surgical procedures (up to four) that can be classified as secondary surgical procedures are reimbursed at no more than 50 percent of the capped fee for the procedure. All secondary surgical procedures over four are sent to Medical Review.

AHCCCS will reimburse each additional procedures beyond the first four secondary procedures at no more than 50 percent of the capped fee for the procedure.

#### BILLING FOR MULTIPLE SURGERIES

The primary procedure must be billed on the first line of the 1500 form when multiple surgical procedures are performed on the same recipient on the same day or at the same session. Secondary surgical procedures should be billed on subsequent lines, using Modifier 51(Multiple Procedures).

#### AHCCCS PROCESSING AND REIMBURSEMENT OF MULTIPLE SURGERY CLAIMS

If a provider does not identify surgical procedures by using Modifier 51, the AHCCCS system will identify the first procedure on the claim as the primary procedure.

Reimbursement of the primary procedure will be at the lesser of billed charges or the AHCCCS capped fee.

All other surgical procedures will be identified by the AHCCCS system as secondary procedures. Reimbursement of the secondary procedures will be priced at no more than 50 percent of the capped fees.

## **Detail Design Portion**

For Internal ISD Approval Only

## A. Change Management

Change Request Number	Requestor	Approval Date	Change Description

## B. Scope

N/A

## **C. Final Impacts**

N/A

## D. Edit/Reference Table Updates

Table Num	Action	Table Name	Values	Description of Action
RF096	Change	Messages By Code	Edit Code: 8989 Message Description: Encounter Not Eligible To Adjust – Void And Resubmit	Change message.

## E. Database Updates

N/A

## **F. Impacted Components**

Sys	Тур	Name	Ver	St	O/B	URT?	New/ Mod	Comments
ENC	PGM	EC61L917		BT	В		Mod	
ENC	PGM	EC91L970		BT	В		Mod	
ENC	PGM	EC91L972		BT	В		Mod	

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## G. Detail Design

### 1. Programs

Component Name	Туре	Description	Associated Requirement(s)			
EC61L917	PGM	х	1			
Replace the current ASC multiple surgery pricing process with logic adapted from the Claims Form 1500 multiple surgery pricing process.						
EC91L970	PGM	х	2			
Program will be modified to pend line level Replacement and Void transactions for error H280 - ENCOUNTER NOT ELIGIBLE TO ADJUST.						
EC91L972	PGM	х	2			
Program will be modified to pend line level Replacement and Void transactions for error H280 - ENCOUNTER NOT ELIGIBLE TO ADJUST.						

## H. Estimate

### **Estimate Detail**

SSR #	2007-0358
Task	1
Version	Initial
Version Date	05/16/2008

## **Estimate Development**

Component	#	Skill Level	Skill Pct	Туре	Complexity	New?	Base Hrs	Total Est. Hrs
EC61L917	1	PA3	100	Program	Very Difficult	False	60	60.00
EC91L970	1	PA3	100	Program	Very Easy	False	5	5.00
EC91L972	1	PA3	100	Program	Very Easy	False	5	5.00

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## **Estimate Non-Development**

Task	Base Pct	Total Est. Hrs
Analysis	20	14.00
Documentation	6	4.20
System Testing	12	8.40
Regression Testing	10	7.00
User Acceptance Testing	13	9.10
Implementation	5	3.50
Post Implementation	2	1.40
Training	3	2.10

## **Estimate Change Requests**

Change Request #	Date	Total Est. Hrs

### **Estimate Totals**

Development	70.00
Non-Development	49.70
Change Requests	.00
TOTAL ESTIMATE	119.70

## I. Design Assumptions

N/A

## J. Design Attachments

N/A

## K. Detail Design Approvers

### **ISD Stakeholders**

Mike Upchurch	ISD Project Manager	
Stacy Westerholm	ISD Testing Representative	☐ Testing Planned     ☐ Testing Bypassed

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